FILE	NOW: FILING		FILED)				
COF	PROFIT RPORATION JAL REPORT		Sandra B.	IMENT OF STATE Mortham y of State	Jan 20	5 1998 8		am
	1998 [`]			ORPORATIONS	Sec	retary of	f Sta	te
DOCUI	MENT # V2	3930	(3)			ictary o.	ı ota	
	MUSIC, INC.				:			
Principal Plac			g Address					
1550 BRICKELL AVE 1550 BRICKELL AV #513-A #513-A								
MIAMI FL 33129 MIAMI FL 33129					<u> </u>	NOT WRITE IN THIS	SPACE	
					3. Date incorporated	or Qualified		
2. Principal Place of Business 2a. Mailing Address					03/26/1992 4. FEI Number		Anni	lied For
21 192			•		65-0321356	3		Applicable
Suite, Apt.	*, etc. 806	27)	ite, Apt. #, etc.		5. Certificate of Status		\$8.75 Ad Fee Requ	
City & State	Mi . FLORI	~ ^	ty & State		6. Election Campaign		\$5.00 м	
23 / / / 4 Zip	Country	28 Zi	<u> </u>	Country	Trust Fund Contribu	ves or has paid the cur	Added to	
24 331		A 29		30	Personal Property	Tax due June 30]Yes □	-
	9. Name and Address of	of Current Register	ed Agent		10. Name and Addres	s of New Registered	Agent	
	UIZ, JORGE R ALVAREZ			81 Naprez	viz, JORGE	R. ALVO	REZ	
-	550 BRICKELL AVE			82 Street	ddress (P.O. Box Number is	Not Acceptable	D-80	14
STE 513-A MIAMI FL 33129				83	12) 01000		W 00	
	12 4411 1 E 00 120			84 City .		 	7:- 0-	
					11 Ami	FL	85 Zip Co	129
11. Pursuant : office or r agent. I a	to the provisions of Sections egistered agent, or both, in m familiar with, <u>and</u> accept	: 607.0502 and 607. the State of Florida, the obligations of S	1508, Florida Statute Such change was a ection 607.0505, Flori	s, the above-named uthorized by the corp rida Statutes.	corporation submits this stater oration's board of directors. I	nent for the purpose of hereby accept the app	changing its rointment as re	registered gistered
SIGNATURE		BeAlo	Service .	TORES	ownez		-98	
12.	Signature, typed or protest name of the OFFIG	ZERS AND DIRECTO		Registered Agent signature	·	DATE IES TO OFFICERS AND		IN 12
TITLE	P	ZENOTINO DINEGRA	DELETE	1.1 TITLE	P .	L	Change	Addition
NAME	RUIZ, JORGE R A			1.2 NAME	Ruiz, JORGE	R ALVAREZ	co/	
STREET ADDRESS	1550 BRICKELL AVE	E, 513-A		1.3 STREET ADDRESS	1925 BRICKE	L NE D-1	800	
CITY-ST-ZIP	MIAMI FL 33129 V		DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	MIAMI, FL	33129	Change	Addition
TITLE NAME	GALLEGO, JUAN A	TARODO	C Detert	2.2 NAME	GALLEGO. TUE	IN A. TARO	DO	TT Addition
STREET ADDRESS	1550 BRICKELL AVE			2.3 STREET ADDRESS	GALLEGO, JUL 1925 BRICKE MIAMI, FL	LL AVE. D-	806	
CITY-ST-ZIP	MIAMI FL 33129			2. 4 CITY - ST - ZIP	MIAMI, FL	33129		
TITLE			DELETE	3.1 TITLE			Change	Addition.
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET ADDRESS				
CITY-ST-ZIP TITLE			DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	<u> </u>		Change	Addition
NAME			_	4. 2 NAME				
STREET ADDRESS				4.3 STREET ADDRESS			-	-
CITY-ST-ZIP				4.4 CITY - ST - ZIP				
TITLE			☐ DELETE	5.1 TITLE			Change L	∐ Addition
NAME				5.2 NAME				
STREET ADDRESS CITY+ST-ZIP				5.3 STREET ADDRESS 5.4 CITY - ST - ZIP				
TITLE			DELETE	6.1 TITLE			Change	Addition
NAME				6.2 NAME				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of an an attachment with an accress.

SIGNATURE:

SIGNATURE:

Date

Da

6.3 STREET ADDRESS

STREET ADDRESS